

N08000003769

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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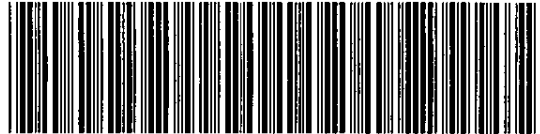
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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Shelley L. Clifford  
Paralegal  
Direct: (312) 602-5061  
Fax: (312) 698-7461  
shelley.clifford@bryancave.com

November 12, 2008

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re:** Change of Agent

Dear Sir/Madam:

Enclosed, in duplicate, is a Statement of Change of Registered Agent to be processed on behalf of ocean Club at Port Canaveral Inc. Also enclosed is a check in the amount of \$35.00 in payment of the required fee. Please acknowledge receipt of this change by date stamping the enclosed copy and returning it to me in the enclosed prepaid self-addressed stamped envelope.

If you have questions, please contact the undersigned.

Sincerely,

A handwritten signature in cursive script that reads "Shelley L. Clifford".  
Shelley L. Clifford  
Paralegal

slc

Enclosures

**Bryan Cave LLP**  
161 North Clark Street  
Suite 4300  
Chicago, IL 60601-3315  
Tel (312) 602-5000  
Fax (312) 602-5050  
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www.bryancavestrategies.com  
Washington, DC  
St. Louis

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** OCEAN CLUB AT PORT CANAVERAL INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** N08000003769

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shelley L. Clifford, Paralegal  
(Name of Contact Person)

Bryan Cave LLP  
(Firm/Company)

161 N. Clark, Ste. 4300  
(Address)

Chicago, IL 60601  
(City/State and Zip Code)

For further information concerning this matter, please call:

Shelley L. Clifford, Paralegal at ( 312 ) 602-5061  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Ocean Club at Port Canaveral Inc.
2. The principal office address: 909 Tenth Street South, Suite 105  
Naples, FL 34102
3. The mailing address (if different): n/a
4. Date of incorporation/qualification: 4/17/2008 Document number: N08000003769
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

John C. Swanson  
909 Tenth Street South, Suite 105  
Naples, FL 34102

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Walter Margerison  
909 Tenth Street South, Suite 105  
(P.O. Box NOT acceptable)  
Naples, FL 34102

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TALLAHASSEE, FLORIDA

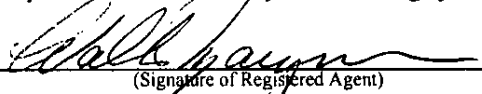
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

John J. Goebel  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
(Signature of Registered Agent)

10/30/08  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)